

**UNIFORM HAZARDOUS  
 WASTE MANIFEST**

1. Generator's US EPA ID No. CA1D191311614192113  
 Manifest Document No. 0101013

2. Page 1 of 1 information in the shaded areas is not required by Federal law

3. Generator's Name and Mailing Address  
 QUALITY FRONTS  
 210405 OSBORNE, CALOOGA PARK, Ca. 91304

A. State Manifest Document Number  
 87114377

4. Generator's Phone (818) 709-8505

B. State Generator's ID

5. Transporter 1 Company Name  
 Belkabit Chemicals

C. State Transporter's ID  
 823777

6. US EPA ID Number  
 CA1D19131161368119

D. Transporter's Phone  
 (213) 947-0668

7. Transporter 2 Company Name

E. State Transporter's ID

9. Designated Facility Name and Site Address  
 OMEGA RECOVERY  
 12504 WHITTIER BLVD  
 WHITTIER, CA 90602

F. Transporter's Phone

G. State Facility's ID  
 CA1D0422450011

H. Facility's Phone  
 (513) 698-0091

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

12. Containers 13. Total Quantity 14. Unit Wt/Vol 1. Waste No.

a. WASTE, flammable liquid n.o.s., UN 1993

No. Type Quantity Unit Wt/Vol Waste No.  
 001 DM 000556 State 214

b.  
 c.  
 d.

EPA/Other 0001  
 State  
 EPA/Other  
 State  
 EPA/Other  
 State  
 EPA/Other

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

A(1) Paint contaminated wash thinner.

a. 01 b.  
 c. d.

15. Special Handling Instructions and Additional Information

Keep away from sparks and flames.

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name  
 Manuel Flores

Signature  
 Manuel Flores Month Day Year  
 11 21 87

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name  
 RICHARD SENTENO

Signature  
 Richard Senteno Month Day Year  
 11 10 87

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name  
 Bill Solonca

Signature  
 Bill Solonca Month Day Year  
 11 21 87

IN CASE OF AN EMERGENCY → SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-952-7650  
 GENERATOR  
 TRANSPORTER  
 FACILITY